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## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\* *YES JAL 11/22/04*  
 This appln claims benefit of 60/400,743 08/02/2002

\*\* FOREIGN APPLICATIONS \*\*\*\*\* *none JAL 11/22/04*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 10/30/2003

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CT	SHEETS DRAWING 14	TOTAL CLAIMS 30	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>JAL 11/22/04</i> Verified and Acknowledged Examiner's Signature Initials				

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## TITLE

Heated dispenser

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